PART B - FEE(S) TRANSMITTAL

Complete and	send	this	form,	together	W	appli
--------------	------	------	-------	----------	---	-------

applicable fee(s), to: Mail

Mail Stop ISS FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000



or <u>Fax</u>

			OI <u>X AA</u>	(103) 140 4000	•					
appropriate. All further cor	respondence including the below or directed otherwise	Patent, advance or	ders and notification	of maintenance fees v	ired). Blocks 1 through 5 swill be mailed to the current; and/or (b) indicating a sep	t correspondence address				
39207 75	E ADDRESS (Note: Use Block 1 for	any change of address)	APR 0 8 2005	hapers. Each addition have its own certificat	mailing can only be used fais certificate cannot be used all paper, such as an assignme of mailing or transmission.	ent or formal drawing, m				
SACCO & ASSO P.O. BOX 30999 PALM BEACH GA 4/11/2005 MBELETE2 000	ARDENS, FL 33420-0	999	A PANEWARE	hereby certify that the States Postal Service addressed to the Mai	rtificate of Mailing or Tran nis Fee(s) Transmittal is beir with sufficient postage for fi I Stop ISSUE FEE address TO (703) 746-4000, on the	ng deposited with the Un rst class mail in an envel s above, or being facsim				
1 FC:1501 1400.00 0P 2 FC:1504 300.00 0P				Robert	J. Sacco	(Depositor's na				
						(Signat				
	9.00 OP			4-5	-05) (D				
APPLICATION NO.	FILING DATE		FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
10/614,149	07/07/2003		Stephen B. Brow	n	7162-74	5048				
TITLE OF INVENTION: TI	RANSVERSE MODE CON	TROL IN A TRAN	•							
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1400		\$300	\$1700	04/21/2005				
EXAMINER ART U			ТС	LASS-SUBCLASS						
JONES, STEPHEN E		2817	17 333-08100B							
Change of correspondence	address or indication of "Fe	ee Address" (37	2. For printing on	the patent front page, li	st Sacco & Asso	ociates, PA				
Change of correspondence address (or Change of Correspondence or agents OR, alternatively,										
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (print	or type)						
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	lata will appear on t a substitute for filin	he patent. If an assign g an assignment.	nee is identified below, the	document has been filed				
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
HARRIS CORPORATION MELBOURNE, FL										
Please check the appropriate assignee category or categories (will not be printed on the patent):										
a. The following fee(s) are			Payment of Fee(s):		1					
X Issue Fee			A check in the ar	mount of the fee(s) is en	closed.					
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.										
Advance Order - # of Copies3 The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number _50-2884 (enclose an extra copy of this form).										
	(from status indicated above	•								
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application interest above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.										
NOTE: The Issue Fee and Punterest as shown by the reco	is requested to apply the issuablication Fee (if required) with the United States Pate	vill not be accepted ont and Trademark	from anyone other to Office.	re-apply any previousl han the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other part				
Authorized Signature	7	7		Date	4-5-05					
Typed or printed name	Robert J. Sac	eco		Registration	No. 35,667					
his collection of information	n is required by 37 CFR 1.3	11. The information	is required to obtain	or retain a benefit by	he public which is to file (an	d by the USPTO to proc				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No.

10/614,149

Confirmation No. 5048

Applicant

BROWN July 7, 2003

Filed

TC/A.U.

2817

Examiner

JONES, Stephen E.

Docket No.

7162-0074

Customer No.

39207

TRANSMITTAL LETTER

Mail Stop Issue Fee **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Sirs:

Please find enclosed for filing:

- ✓ PTOL-85 Fee Transmittal
- ✓ Fee: \$1709
- ✓ Other: Postcard Receipt
- ✓ Please charge any deficiencies or credit any overpayment to Deposit Account No. 50-2884

Respectfully submitted,

Robert J. Sacco

Registration No. 35,667

SACCO & ASSOCIATES, P.A.

P.O. Box 30999

Palm Beach Gardens, FL 33420-0999

Tel: 561-626-2222

Certificate Under 37 C.F.R. 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-____ Typed name of person signing this certificate: ROBERT J. SACCO